

Free and Low-Cost **Autism** **Evaluation** Pathways Checklist

The pathways to an autism evaluation, what to ask before you book, and what you can apply for after a diagnosis.



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Which pathways cost families nothing

Three pathways cost families nothing, and your child's age and your insurance coverage decide which of them you qualify for. Early Intervention covers children under 3, a school district evaluation covers children 3 and up, and Medicaid EPSDT covers children under 21 who are enrolled in Medicaid.

Use the tracker at the back of this kit when you call clinics, so quoted costs, contact names, and appointment dates stay in one place.



Good to know

Screening is the short checklist your pediatrician runs at the 18-month and 24-month well-child visits. A positive screen means your child needs a full evaluation. The evaluation itself takes several hours and ends with a written report. Your insurance company uses that report to approve ABA, speech, or occupational therapy. Your school district uses it to write an IEP, which is the school's written special education plan.

Free and low-cost pathways

Pathway	Who it is for	What it costs	Typical wait	What you get
Early Intervention (IDEA Part C)	Children under 3	No cost to the family	Ask your state's Early Intervention program	Services that can start quickly, and a referral for a full evaluation if your child needs one
School district evaluation (IDEA Part B)	Children 3 and up	No cost to the family	Conducted within 60 days of your signed consent, unless your state sets its own timeline	An educational classification and an IEP
Medicaid EPSDT	Children under 21 on Medicaid	Covered by Medicaid	Ask the clinic	An autism evaluation that federal law requires Medicaid to cover

Free and low-cost pathways (continued)

Pathway	Who it is for	What it costs	Typical wait	What you get
University or training clinic	Families paying out of pocket	Priced per service, so ask for the fee schedule	Ask the clinic	A full evaluation battery
Telehealth evaluation	Families facing long local waits	Ask the clinic	Ask the clinic	Some or all of an evaluation done remotely
ADOS-2 evaluation through Alpaca Health	Families in the cities Alpaca Health serves	Billed to insurance, so your share depends on your plan	Ask the clinic	An ADOS-2, the observation used in most full batteries

Wait times vary by clinic, so ask when you call. In a 2023 survey of autism specialty centers, 61% reported waits over 4 months and 13% reported waits over a year. University clinics price by service, and the University of Alabama clinic lists \$150 for the diagnostic interview and \$102 for the first hour of scoring and writing the report.

Questions to ask before you book

Ask these before you put money down or take an appointment slot, since the answers change what you pay and how long you wait.

☐ Is this provider in-network with my plan?

Call your insurer before you book. Every state and the District of Columbia has acted to require coverage for autism treatment in state-regulated health plans, and the limits differ by state and by plan. The law of the state where your plan was issued applies, and self-funded employer plans are exempt, so ask your plan whether the mandate applies to you.

☐ What CPT codes will be billed?

CPT codes are the billing codes on your statement, and they affect what your plan pays. Common ones for autism evaluations are 90791, 92523, 96130 and 96131, and 96136 and 96137.

☐ Where does my deductible stand right now?

You pay the rest of your deductible first, then your coinsurance share of the balance, often around 20 percent. Ask your plan what your share works out to before you book.

☐ Does my plan require prior authorization for an autism evaluation?

Prior authorization is your plan's written yes before the evaluation. It is common, and it can add time, so request it when you book.

☐ What is included, and what will the final report contain?

A full battery includes an ADOS-2 observation, a structured parent interview such as the ADI-R, cognitive testing, adaptive behavior measures, and a written report with DSM-5 conclusions. A shorter evaluation costs less and may not satisfy insurance or school district requirements.

Questions to ask before you book (continued)

☐ **Which parts of the evaluation happen by telehealth?**

Not every evaluator can administer the ADOS-2 remotely, particularly for younger children. Ask whether your insurance company and your school district will accept the report.

☐ **Who conducts the evaluation, and what credential do they hold?**

Ask who will run the evaluation, what credential that person holds, and who writes the final report. If any part of the battery gets referred out, ask how much time that adds.

☐ **Is my child's Medicaid coverage enough on its own?**

The EPSDT benefit, short for Early and Periodic Screening, Diagnostic, and Treatment, covers autism evaluations for children under 21. Ask your state Medicaid office or your child's Medicaid-enrolled pediatrician about EPSDT-covered autism evaluations.

☐ **Would a clinic in a neighboring area cost less?**

If your local waitlist is long and you can travel, call clinics in nearby areas and compare what each one quotes you for the same set of billing codes.

What you can apply for after a diagnosis

What you can apply for	Who uses the diagnosis
ABA, speech, and occupational therapy	Your insurance company, before it approves services
An IEP or 504 plan	Your child's school district, which uses it as part of its own eligibility decision
Medicaid waiver enrollment	State waiver programs. Many require a qualifying disability determination, and the diagnosis is usually the first step in that process. Eligibility rules differ by state and by waiver.
An SSI claim based on autism	The Social Security Administration, which looks at the diagnosis together with documented limits on your child's daily functioning

Each of these asks for the written report from an evaluation. A positive screening result does not replace it.

After the diagnosis

Step 1: Share the report with your child's pediatrician

Send the report to the pediatrician's office as soon as it arrives, so the medical record shows the diagnosis. Steps two and three happen on the same day.

Step 2: Send the report to your insurance company

Your insurance company needs the report to start prior authorization for ABA, speech, or occupational therapy, which is your plan's written yes before services start. Send it the day the report arrives.

Step 3: Give the report to your child's school

If your child is school-age, this starts the IEP process at the district. If your child is under 3, it starts the Part C transition process.

Step 4: Apply to the programs that use the diagnosis

Many state Medicaid waiver programs require a qualifying disability determination before you can enroll, and the diagnosis is usually the first step toward one. Rules differ by state and by waiver, so ask your state's waiver office what it needs. For an SSI claim based on autism, the Social Security Administration looks at the diagnosis together with documented limits on your child's daily functioning.

Evaluation tracker

Date	Clinic or program	Contact	Quoted cost or coverage	Appointment date

Sources

Sources change over time, so check each one before you act on it.

Initial evaluation timeline, 34 CFR 300.301, IDEA, US Department of Education

<https://sites.ed.gov/idea/regs/b/d/300.301>

Early Intervention evaluations at public expense, 34 CFR 303.521, Cornell Law School

<https://www.law.cornell.edu/cfr/text/34/303.521>

Medicaid EPSDT benefit, Medicaid.gov

<https://www.medicaid.gov/medicaid/benefits/early-and-periodic-screening-diagnostic-and-treatment>

How doctors screen for autism at the 18-month and 24-month visits, HealthyChildren.org, American Academy of Pediatrics

<https://www.healthychildren.org/English/health-issues/conditions/Autism/Pages/How-Doctors-Screen-for-Autism.aspx>

Wait Times and Processes for Autism Diagnostic Evaluations, a 2023 survey of US autism specialty centers by Cognoa, hosted on cms.gov

<https://www.cms.gov/files/document/wait-times-and-processes-autism-diagnostic-evaluations-first-report-survey-autism-centers-us.pdf>

Autism Spectrum Disorders Clinic self-pay fee schedule, University of Alabama

<https://autism-clinic.ua.edu/self-pay-schedule/>

2025 Employer Health Benefits Survey, coinsurance rates, KFF

<https://www.kff.org/health-costs/2025-employer-health-benefits-survey/>

State-regulated health benefit plans and autism coverage by state, Autism Speaks (updated March 2020)

<https://www.autismspeaks.org/state-regulated-health-benefit-plans>

This kit is general information and is not medical or legal advice. Talk to a qualified professional about your child's situation.

Start with Alpaca Health

Alpaca Health offers ADOS-2 evaluations in the cities it serves. These evaluations are billed to insurance, so depending on your plan the evaluation may be fully covered or you may owe part of the cost. The evaluation is set up through the intake, and Alpaca Health verifies your benefits there, so you know your share before anything starts. If you want a quick first check before the intake, the free screeners are on the Alpaca Health autism evaluation page.



When you are ready

Start with Alpaca Health →

<https://secure.alpacahealth.io/signup>



Scan to open

Or take the free screeners first <https://www.alpacahealth.io/autism-evaluation>